

STUDENT ATHLETICS PARTICIPATION WAIVER

ASSUMPTION OF RISK AND RELEASE OF ALL CLAIMS FOR THE 2020-21 ACADEMIC YEAR

STUDENT

Name: _____ Grade: _____

I am aware playing or practicing to play/participate in any sport can be a dangerous activity involving many risks of injury. I understand that the dangers and risks of playing or practicing any sport include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, other aspects of my body, general health and well-being. I understand that the dangers and risks of playing or practicing to play/participate in any sport may result not only in serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities, and generally to enjoy life.

I also understand that while the Board will continue to fully comply with recommended safety standards and safety precautions as issued by the Ohio and Lake County Departments of Health and Board guidelines, removing all risk of contracting COVID-19 while students, staff, and/or spectators gather is impossible, just as it is impossible in any other gathering of persons.

I will conduct a daily symptom assessment (self-evaluation) and will stay at home if experiencing symptoms of fever, cough, shortness of breath or difficulty breathing, chills, muscle pain, headaches, sore throat, or new loss of taste or smell. I will stay at home if I have been exposed to any person who has tested positive for COVID-19 in the past fourteen (14) days. I will immediately notify my coach(es) of the reason for my absence.

Because of the dangers of participating in intramural or interscholastic athletic activity, I recognize the importance of following teachers' and coaches' instructions regarding playing techniques, training and other team rules, and agree to obey such instructions.

In consideration of the Madison Local School District Board of Education (hereinafter "Board of Education") permitting me to engage in all activities related to sports, including, but not limited to, trying out, practicing or playing/participating in any sport, I hereby voluntarily assume the risk of accident, injury or damage to person or property. Furthermore, I voluntarily release and discharge the Board of Education, its employees, agents, representatives, coaches and volunteers, in both their official and individual capacities, from, without limitation, any and all actions, causes of action, claims, demands, damages, costs, expenses, compensation, and/or suits at law or in equity, on account of or relating to any act or omission by the Board of Education, its employees, agents, representatives, coaches or volunteers. I also agree to defend, indemnify and save the Board of Education, its employees, agents, representatives, coaches and volunteers harmless from and against any and all liability, actions, causes of action, debts, claims, demands, or suits at law or in equity of any kind and nature whatsoever which may arise, directly or indirectly, by or in connection with my participation in any activity. The terms hereof shall serve as a release for my heirs, estate, executor, administrator, and assignees.

In addition, I acknowledge all the regulations and the potential of denial and dismissal from sport participation for violations of Board policy, for not complying with the rules and guidelines pertaining to Covid-19, and/or the expectations and standards of the coach(es).

Date

Signature of Student

ASSUMPTION OF RISK AND RELEASE OF ALL CLAIMS FOR THE 2020-21 ACADEMIC YEAR

PARENT/GUARDIAN

I, _____, am the parent/legal guardian of _____ (student), now enrolled in grade _____. I have read the assumption of risk and release signed by the student and understand its terms. I understand that all sports can involve many risks of injury, including, but not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, other aspects of my child's body, general health and well-being. I understand that the dangers and risks of playing or practicing to play/participate in any sport may result not only in serious injury, but in a serious impairment of my child's future abilities to earn a living, to engage in other business, social and recreational activities, and generally to enjoy life.

In consideration of the Madison Local School District Board of Education (hereinafter "Board of Education") permitting my child to engage in all activities related to intramural or interscholastic sport, including but not limited to, trying out, practicing, or playing/participating in sports activities, I hereby give permission for the student to participate in such activities and voluntarily agree, on my own behalf and on behalf of my child to release and discharge the Board of Education, its employees, agents, representatives, coaches and volunteers, in both their official and individual capacities from, without limitation, any and all actions, causes of action, claims, demands, damages, costs, expenses, compensation, and/or suits at law or in equity, on account of or relating to any act or omission by the Board of Education, its employees, agents, representatives, coaches or volunteers in connection with the indicated activity. I also agree to defend, indemnify and save the Board of Education, its employees, agents, representatives, coaches and volunteers harmless from and against any and all causes of action, debts, claims, demands, or suits at law or in equity of any kind and nature whatsoever which may arise, directly or indirectly, by or in connection with my child's participation in the indicated activity. The terms hereof shall serve as a release for my heirs, estate, executor, administrator, and assignees, and the heirs, estate, executor, administrator, and assignees of the student, and for all members of our family.

I acknowledge that I have read and will support the policies (rules & regulations) that have been set forth for students participating in the Madison Local Schools' extracurricular programs, including the self-assessments described in the assumption of risk and waiver signed by the student.

In addition, I acknowledge all the regulations and the potential of denial and dismissal from sport participation for violations of Board policy, for not complying with the rules and guidelines pertaining to Covid-19, and/or the expectations and standards of the coach(es).

Date

Signature of Parent/Legal Guardian*

Date

Signature of Parent/Legal Guardian*

***Both parents must sign unless only one has legal custody.**